

Breastfeeding

Two objectives of Healthy New Jersey 2010 are for 75% of infants to be breastfed exclusively or in combination with formula in the 24 hours prior to the infant's discharge from the hospital and for 90% of those (or 67.5% of all infants) to be breastfed exclusively. While the first target has nearly been achieved, recent data suggest that breastfeeding behavior is moving further away from the second target.

The percentage of mothers in New Jersey exclusively breastfeeding prior to the infant's discharge from the hospital decreased from 42% in 1997 to 35% in 2006. Formula only feeding also decreased from 42% to 33%, while breastfeeding in combination with formula feeding increased from 15% to 30%.

The trend in increased combination feeding is consistent regardless of the mother's age, race/ethnicity, marital status, birthplace, level of educational attainment, family size, type of prenatal care provider or infant's sex or plurality (singleton, twin, etc.).

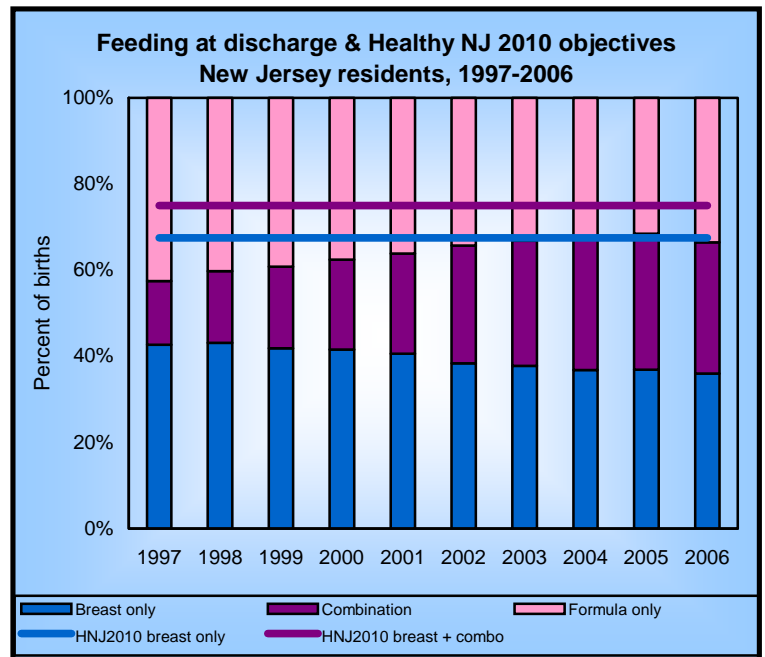
Exclusive breastfeeding prior to discharge is more likely among older mothers, non-Hispanic White and Asian/Pacific Islander mothers, native-born mothers, married mothers, mothers with higher levels of education, mothers with fewer previous births, mothers who delivered singletons, and mothers who received prenatal care from a private physician.

Formula feeding prior to discharge is more likely among younger mothers, non-Hispanic Black mothers, mothers born in Puerto Rico, unmarried mothers, mothers with less education, mothers with two or more previous births, mothers who delivered twins or higher order births, and mothers who received prenatal care at a clinic, through a government program, or not at all.

Combination (breast and formula) feeding prior to discharge is more likely among Hispanic mothers and foreign-born mothers.

Among New Jersey mothers surveyed in 2004, 72% ever breastfed, 37% were breastfeeding at 6 months, and 17% at 12 months. Exclusive breastfeeding at 3 months was reported by 43% of those surveyed and 15% were exclusively breastfeeding at 6 months. All rates through 6 months were slightly higher in New Jersey than in the U.S. as a whole.

Among participants in the WIC Program in 2004, New Jersey had a higher percentage of mothers breastfeeding than the nation as a whole. 57% of mothers ever breastfed, 36% breastfed at least 6 months, and 28% breastfed at least 1 year. The national figures were 56%, 23%, and 18%, respectively.



- The PRAMS survey of New Jersey mothers 2-6 months postpartum revealed that the main reason for not breastfeeding was personal preference, followed by caring for older children and return to work or school.
- The American Academy of Pediatrics states that breastfeeding is the best, most complete source of nutrition for babies. Exclusive breastfeeding for the first six months is preferred over combination and formula feeding, provides ideal nutrition, and is sufficient to support optimal growth and development. It is recommended that breastfeeding, supplemented with iron-enriched solid foods after six months of age, continue for as long as mutually desired.
- For the baby, human milk is easy to digest, tastes good, and provides antibodies to protect against illness. There is a decreased likelihood of SIDS, colic, diarrhea, constipation, and diaper rash in the short-term and allergies, chronic diseases, dental caries, and overweight later in life. Breastfeeding promotes appropriate jaw, teeth, and speech development as well as overall facial development. Breastfeeding enhances baby's immune system, cognitive development, and emotional health.
- For the mother, breastfeeding decreases the risk of breast and ovarian cancer, hip fractures, and osteoporosis. There is an easier loss of pregnancy weight and less postpartum bleeding with less risk of anemia. Breastfeeding is convenient, time- and money-saving, and promotes mother-infant bonding.
- Breastfeeding benefits employers because mothers are less likely to miss days of work to care for a sick baby and the cost of healthcare is lower because breastfed babies tend to be healthier.
- Breastfeeding benefits the environment because there is no packaging, processing, or transportation required for human milk.

For more data from the New Jersey Department of Health and Senior Services: www.nj.gov/health/chs

For more information about breastfeeding from the New Jersey Department of Health and Senior Services, Division of Family Health Services: www.nj.gov/health/fhs/newborn/feed.shtml and www.nj.gov/health/fhs/wic/breastfeedingpromsupp.shtml

Sources:

New Jersey Department of Health and Senior Services, Center for Health Statistics:
[Healthy New Jersey 2010](#)
 New Jersey 1997-2006 Electronic Birth Certificate files as of July 24, 2006

U.S. Department of Health and Human Services, Centers for Disease Control and Prevention:
[Breastfeeding: Data and Statistics: Breastfeeding Practices — Results from the 2004 National Immunization Survey](#)

New Jersey Department of Health and Senior Services, Division of Family Health Services:
[2004 Pediatric Nutrition Surveillance System](#)
[Pregnancy Risk Assessment Monitoring System \(PRAMS\): Breastfeeding in New Jersey, 2002-2003](#)
[Benefits of Breastfeeding](#)

American Academy of Pediatrics:
[Policy Statement: Breastfeeding and the Use of Human Milk](#)

La Leche League, Frequently Asked Questions:
[What are the benefits of breastfeeding my baby?](#)

National Women's Health Information Center:
[Benefits of Breastfeeding](#)



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